

PART B—ISSUE FEE TRANSMITTAL

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DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

1. CORRESPONDENCE ADDRESS

BENTON S DUFFETT JR
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ALEXANDRIA VA 22313-1404

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

☐ Check if additional changes are enclosed

| APPLICATION NO. | FILING DATE | TOTAL CLAIMS | EXAMINER AND GROUP ART UNIT | DATE MAILED |
|-----------------------|---------------------|--------------|-----------------------------|-------------|
| 08/429,494 | 04/26/95 | 007 | PYON, H 1313 | 03/03/97 |
| First Named Applicant | WILLIAMSEEN, ANDERS | | | |

TITLE OF INVENTION: CAPILLARY MICRODUVETTE

| ATTY'S DOCKET NO. | CLASS-SUBCLASS | BATCH NO. | APPLN. TYPE | SMALL ENTITY | FEE DUE | DATE DUE |
|-------------------|----------------|-----------|-------------|----------------------|-----------------------------------|----------|
| 1 003300-336 | 422-002.000 | K12 | UTILITY | YES NO | \$445.00 \$1,290.00 | 06/03/97 |

3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 BURNS, DOANE, SWECKER & MATHIS, L.L.P.

2

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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

HEMOCUE AB

(2) ADDRESS: (CITY & STATE OR COUNTRY)

Angelholm, Sweden

6a. The following fees are enclosed:

☒ Issue Fee ☐ Advance Order - # of Copies

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☒ Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

BENTON S. DUFFETT JR., REG. NO. 22,030

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

A. ☐ This application is NOT assigned.

☒ Assignment previously submitted to the Patent and Trademark Office.

☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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on: (Date)

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(Name of person making deposit)

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(Date)

1. TRANSMIT THIS FORM WITH FEE